

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	HL		2-13-01
O.I.P.E. CLASSIFIER		49	3/11/01
FORMALITY REVIEW	AK	931	04/05/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 ÷ ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	✓
2			0 0
3			0 0
4			✓ 0
5			0 0
6			0 0
7			✓ ✓
8			0 0
9			0 0
10			✓ 0
11	✓	✓	✓
12			0 0
13			0 0
14			✓ 0
15			0 0
16			0 0
17			✓ ✓
18			0 0
19			0 0
20			✓ ✓ 0
21	N	N	N
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31	✓	✓	✓
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41	✓	✓	✓
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43			
44	✓	✓	✓
45	✓	✓	✓
46	N	N	N
47	✓	✓	✓
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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